

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	70205	20-2-99
O.I.P.E. CLASSIFIER		59	67
FORMALITY REVIEW	GH	71828	6-4-99

INDEX OF CLAIMS

S Rejected
 = Allowed
 (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

BEST AVAILABLE COPY

Claim	Date
Final Original	
1	24 06 8 16
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here